

Form 8872  
(November 2002)

Department of the Treasury  
Internal Revenue Service

# Political Organization Report of Contributions and Expenditures

OMB No 1545-1696

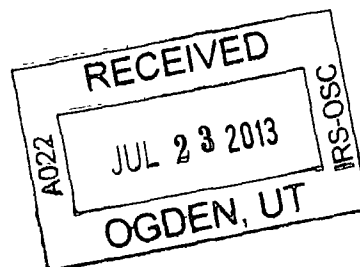
► See Separate instructions.

<b>A</b> For the period beginning <b>January 1</b> , 20 <b>13</b> and ending <b>June 30</b> , 20 <b>13</b>	
<b>B</b> Check applicable boxes <input checked="" type="checkbox"/> Initial report <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report <input type="checkbox"/> Final report	
<b>1</b> Name of organization <b>Jobs and Opportunity</b>	
<b>Employer identification number</b> <b>46 2971970</b>	
<b>2</b> Mailing address (P O Box or number, street, and room or suite number) <b>1401 K Street NW Suite 200</b>	
City or town, state, and ZIP code <b>Washington, DC 20005</b>	
<b>3</b> E-mail address of organization <b>no@email</b>	
<b>4</b> Date organization was formed <b>6/13/2013</b>	
<b>5a</b> Name of custodian of records <b>Benjamin Metcalf</b>	<b>5b</b> Custodian's address <b>1401 K Street NW Suite 200</b> <b>Washington, DC 20005</b>
<b>6a</b> Name of contact person <b>Benjamin Metcalf</b>	<b>6b</b> Contact person's address <b>1401 K Street NW Suite 200</b> <b>Washington, DC 20005</b>
<b>7</b> Business address of organization (if different from mailing address shown above) Number, street, and room or suite number  City or town, state, and ZIP code	
<b>8</b> Type of report (check only one box)	
<b>a</b> <input type="checkbox"/> First quarterly report (due by April 15)	
<b>b</b> <input type="checkbox"/> Second quarterly report (due by July 15)	
<b>c</b> <input type="checkbox"/> Third quarterly report (due by October 15)	
<b>d</b> <input type="checkbox"/> Year-end report (due by January 31)	
<b>e</b> <input checked="" type="checkbox"/> Mid-year report (Non-election year only-due by July 31)	
<b>f</b> <input type="checkbox"/> Monthly report for the month of _____ (due by the 20th day following the month shown above, except the December report, which is due by January 31)	
<b>g</b> <input type="checkbox"/> Pre-election report (due by the 12th or 15th day before the election) (1) Type of election _____ (2) Date of election _____ (3) For the state of _____	
<b>h</b> <input type="checkbox"/> Post-general election report (due by the 30th day after general election) (1) Date of election _____ (2) For the state of _____	
<b>9</b> Total amount of reported contributions (total from all attached Schedules A)	
<b>9</b> <b>0.00</b>	
<b>10</b> Total amount of reported expenditures (total from all attached Schedules B)	
<b>10</b> <b>0.00</b>	
Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete	
<b>Sign Here</b>	<b>Date</b> <b>7/19/2013</b>
Signature of authorized official	

For Paperwork Reduction Act Notice, see separate instructions.

Cat No 30406G

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**Schedule A Itemized Contributions**

Schedule A page of

Name of organization

**Employer identification number****Jobs and Opportunity****46 2971970**

Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
<b>Subtotal</b> of contributions reported on this page only Enter here and also include this amount in the total on line 9 of Form 8872 ▶		\$ <b>0.00</b>

<b>Schedule B</b> <b>Itemized Expenditures</b>	Schedule B page      of
Name of organization <b>Jobs and Opportunity</b>	<b>Employer identification number</b> <b>46 2971970</b>

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure  \$
	Recipient's occupation	Date of expenditure

Purpose of expenditure

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure  \$
	Recipient's occupation	Date of expenditure

Purpose of expenditure

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure  \$
	Recipient's occupation	Date of expenditure

Purpose of expenditure

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure  \$
	Recipient's occupation	Date of expenditure

Purpose of expenditure

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure  \$
	Recipient's occupation	Date of expenditure

Purpose of expenditure

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure  \$
	Recipient's occupation	Date of expenditure

Purpose of expenditure

<b>Subtotal</b> of expenditures reported on this page only Enter here and also include this amount in the total on line 10 of Form 8872	\$ <b>0.00</b>
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